

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION            | INITIALS      | ID NO.         | DATE             |
|---------------------|---------------|----------------|------------------|
| FEE DETERMINATION   | Smc           | 71002          | 8/2/99           |
| O.I.P.E. CLASSIFIER |               | 48             | 8/6/99           |
| FORMALITY REVIEW    | <del>AS</del> | 71702<br>70029 | 8-18<br>10/20/99 |

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

| Claim | Final | Original | Date   |
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If more than 150 claims or 10 actions  
staple additional sheet here

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